Pro Se 1	(Rev	12/16	(Complaint	for a	Civil	Case
10001	(Itc.	12/10	Complaint	101 0	CIVII	Case

## UNITED STATES DISTRICT COURT

for the

Eastern District of Virginia

-

2025 FEB 11 P 12: 23

ALEXANDRIA Division

PHELICEA M. REDD	Case No. 1.25 CV 260 (to be filled in by the Clerk's Office)
Plaintiff(s)  (Write the full name of each plaintiff who is filing this complaint.  If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)	Jury Trial: (check one) Yes No
-V-	manyang pand no and
DEPARTMENT OF DEFENSE, DEPARTMENT OF	Vieta weekladii.org
VETERANS AFFAIRS, DEPARTMENT OF TREASURY, DEFENSE FINANCE AND	Save zman a bina gilla
ACCOUNTING SERVICES	State and Zip Code guras
Defendant(s) (Write the full name of each defendant who is being sued. If the	Lelephone L-unber 252-2
names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)	International Address of the International Control of the International Co

### COMPLAINT FOR A CIVIL CASE

### I. The Parties to This Complaint

#### A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name PHELICEA REDD

Street Address 2630 S VEITCH ST APT 209

City and County ARLINGTON

State and Zip Code VA 22206

Telephone Number 9312189919

E-mail Address PHELICEAREDD@GMAIL.COM

### B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

## Pro Se 1 (Rev. 12/16) Complaint for a Civil Case Defendant No. 1 Name **DEPARTMENT OF DEFENSE** Job or Title (if known) OFFICE OF THE GENERAL COUNSEL Street Address 1000 DEFENSE PENTAGON City and County **ARLINGTON** State and Zip Code VA 20301 Telephone Number E-mail Address (if known) Defendant No. 2 Name DEPARTMENT OF VETERANS AFFAIRS Job or Title (if known) Street Address **810 VERMONT AVE NW** City and County WASHINGTON D.C. State and Zip Code 20420 Telephone Number 202-273-5400 E-mail Address (if known) Defendant No. 3 Name **DEPARTMENT OF TREASURY** Job or Title (if known) Street Address 1500 PENNSYLVANIA AVE NW City and County WASHINGTON D.C. State and Zip Code 20220 Telephone Number E-mail Address (if known) Defendant No. 4 Name

Name	DEFENSE FINANCE AND ACCOUNTING SERVICES
Job or Title (if known)	DFAS
Street Address	8899 EAST 56TH ST
City and County	INDIANAPOLIS MARION
State and Zip Code	IN 46249
Telephone Number	
E-mail Address (if known)	

#### Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

#### II. **Basis for Jurisdiction**

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What	t is the b	oasis for	federal court jurise	diction? (check all that apply)	
	Fed	leral que	stion	Diversity of citizenship	
Fill o	out the p	aragraph	s in this section th	at apply to this case.	
A.	If th	e Basis f	for Jurisdiction Is	s a Federal Question	
		-	fic federal statutes	s, federal treaties, and/or provisions	of the United States Constitution that
	Title You ben read	e 10: ARI can cite efits/pay d them te	MED FORCES Ve any subsection uver with Veterans beingen times and the vertices.	nefits or disability compensation pa erbiage won't change. There's no la	es not combine Active Duty or Retiree y. I can cite at least ten and you can aw that allows commingling of funds, ency's funds. That's white-collar crime.
В.	If th	e Basis 1	for Jurisdiction Is	s Diversity of Citizenship	
	1.	The I	Plaintiff(s)		
		a.	If the plaintiff	is an individual	
			The plaintiff,	(name)	, is a citizen of the
			State of (name)	<u> </u>	· .
		b.	If the plaintiff	is a corporation	
			The plaintiff,	'name)	, is incorporated
			under the laws	of the State of (name)	· · · · · · · · · · · · · · · · · · ·
			and has its prin	cipal place of business in the State	of (name)
			-	tiff is named in the complaint, attac ach additional plaintiff.)	ch an additional page providing the
	2.	The I	Defendant(s)		
		a.	If the defendan	t is an individual	
			The defendant,	(name)	, is a citizen of
			the State of (na	me)	. Or is a citizen of
			(foreign nation)		•

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	b. If the defendant is a corporation	b.	
, is incorporated under	The defendant, (name)		
, and has its	the laws of the State of (name)		
	principal place of business in the State of (name)	•	
	Or is incorporated under the laws of (foreign nation)		
	and has its principal place of business in (name)		
additional page providing the	(If more than one defendant is named in the complaint, attach an same information for each additional defendant.)	٠.٠	
	The Amount in Controversy	3. T	
	The amount in controversy-the amount the plaintiff claims the de stake-is more than \$75,000, not counting interest and costs of co		
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#### III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

No law establishes DFAS. No law allows the Dept of VA to tell DFAS to reduce my pension from the Dept of Defense or for them to combine my pension with disability compensation pay. Who told the Dept of VA to "coordinate" with DFAS and decide how much to pay me? Did people just sit around the room and decide this without including Congress? How could anybody confuse or combine Title 10 with Title 38? It's nearly impossible. That's like allowing the Postal Service (Title 39) to increase Congress' (Title 2) pay more than the \$42k annum authorized (by law), then both agreeing to illegally reallocate funds, and request additional illegal authorizations to cover the salaries, and Congressmen ending up with six figures annum. Does that make any sense?

#### IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

#### Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

These people violate my constitutional rights at every turn and have no regard for legislation or laws. They stress me the heck out on a routine basis. They consistently find ways to increase my blood pressure, migraines, depression, etc. I live in a constant state of frustration.

MONETARY DAMAGES: \$30,000,000 BASIS: U.S. CONSTITUTION

#### V. Certification and Closing

B.

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

#### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case—related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:     FEB 2025
Signature of Plaintiff  Printed Name of Plaintiff  PHEUCEA REDD
For Attorneys
Date of signing:
Signature of Attorney
Printed Name of Attorney
Bar Number
Name of Law Firm
Street Address
State and Zip Code
Telephone Number
E-mail Address

FILED

# UNITED STATES DISTRICT COURT EASTERN DISTRICT OF VIRGINIA DIVISION

7025 FEB | | P | 12: 23

PHEUCEA REDD Plaintiff(s),

DEPT OF DEFENSE DEPT OF VA DEPT OF TREASURY, DEAS Defendant(s),

I declare under penalty of perjury that:

Civil Action Number: 1:25 CV 200

## LOCAL RULE 83.1 (N) CERTIFICATION

No attorney has prepared or assisted in the pr	reparation of	NEW	CASE	OTHER	STATUTORY	ACTIONS
The according has propared or assisted in the pr	(Title of Document)					
PHELICEA REDD						
Name of <i>Pro Se</i> Party (Print or Type)						
( Lel				*		
Signature of Pro Se Party						
Executed on: 1 KB 2025 (Date)						
	OR					
The following attorney(s) prepared or assisted	l me in prepa	ration of				
				(Title of	Document)	
(Name of Attorney)						
(Address of Attorney)						
(Telephone Number of Attorney)						
Prepared, or assisted in the preparation of, this de	ocument.					
(Name of <i>Pro Se</i> Party (Print or Type)						
Signature of <i>Pro Se</i> Party						
Executed on:(Date	e)					